

DeKalb County, Georgia **Department of Planning & Sustainability**



BUILDING PERMIT APPLICATION

				Date:				☐ Res ☐ Nor ☐ Apa ☐ Cor ☐ Cor	ck Applicable Type idential n-Residential nttment ndo Stack Flats ndo Townhouse vnhouse Fee Simple		
(Shaded area the Permit #:	for of	fice us	se only)			Date Processed:					
Job Address					City	State Zip					
Building No.	Building No. Flo					Apt/Lot#	Unit/Suite#				
		•									
Owner of Job Addres	ss					Applicant/Tenant Name					
Owner Name						Business Name					
Address					Type of Business						
City	Sta	ate		Zip		Address					
Tel#			Mobile #			City	State		Zip		
Fax#			E Mail			Tel#		Mobile #	<u> </u>		
Τ αλ π			Liviali			Fax #		E Mail			
						FdX #		L IVIAII			
Contractor Name						Authorized Agent					
Company Name						Business Name					
Address						Address					
City		State		Zip		City	State	_	Zip		
Tel#			Mobile #			Tel #		Mobile #			
Fax#			E Mail			Fax #		E Mail			
Contractor's Busines	ss Lic	ense #		State L	icen	nse #		Qualifying A	Agent Licensed Individual		
Qualifications Held:	□Resi	dential E	Basic Contra	actor □Residential Lig	ht C	Commercial General Contra	ctor				
TYPE OF WORK □ New □ Addition □ Fire Damage □ Alter □ Repair □ Demolish □ Other □ Other						DESCRIPTION OF WORK					
ESTIMATED COST (C	CONST	TRUCTIO	ON OR MO	VE-IN COST) \$							
Minimum Permit Fee	: \$175	.00				tificate of Occupancy Fee: \$	50.00				
			□Not A	pplicable		nange of Ownership	□Ye:	s □No	□Not Applicable		
Model Home Permit:	□Yes	s □No	o □Not A	Applicable	Die	d the Previous Business Close	? □Ye	s □No	□Not Applicable		

LDP Project Name			LDP Project #					
		CONTINUE	D ON NEXT PAGE					
INDICATE ALL ADDITIONA	L PERMITS REQUIR	ED TO COMPLETE TH	IIS JOB:					
☐ Electrical	☐ Heating	☐ Air Conditionin	ng 🗆 Plumb	ing Other	·			
CHECK ONE: Is there a spri	inkler system?	CHECK ONE:		CHECK O	CHECK ONE:			
		SANITARY FACILITI		ELEVATORS? Yes #				
∐Yes	□ No	☐ Sewer	☐ Septic		□ No			
Details (Zoning Requ	irement Informa	tion)						
# of Stories	# Total Rooms	# of Baths	s/Restrooms	# of Kitchens	# of Bedrooms			
Total	Finished			Garage	Outdoor			
Square Footage	Floor Area (Heated)	Unfinished	d a	Floor Area	Living Area ☐ Deck/Porch ☐ Pation			
rootage	(Heateu)	FIOOI AIE	a	Alea	Deck/Porch Datio			
Basement		المعاملين			- d			
Floor Area:	⊔ F	inished		☐ Unfinishe	ea			
SETBACKS:		PROPER'	TY INFO:	Exterior Finish:	Roofing: (Materials)			
Left	Front	Lot Size _		(Materials)				
Right	Rear	Easamont	:: □Yes □ No					
Tight	11001	Lasement	163 110					
Impervious Area, Sq. Ft:	Numbe	r of Units:						
(Shaded area to be co	-				New Construction/Additions)			
TYPES OF CONSTRUCTION (IBC)								
☐ Type IA ☐ Type IIA☐ Type IIA☐ Type IIB☐ ☐ Type IIB☐ ☐ Type IIB☐		□ Type IV □ Type VA	□ Туре	IB □ Type IIB □ Type IIIB □ Type VA				
71 71	31	☐ Type VB			☐ Type VB			
Minimum Permit Fee: \$175	5.00	Certificate of Occup	ancy Fee: \$50.00					
	THIS	S SPACE FOR NON-RE	ESIDENTIAL APPL	ICANTS ONLY				
ADLUTENTEDTAINMENT	ECTABLICUMENT		. h. l. a. h. a. a. a. d h. a. a. a. a. a.					
					r patrons appear nude or in such attire, it not limited to, adult bookstores; adult			
businesses; adult motion pic	ture theaters; adult m	nini-motion picture theat	ers; adult motion pic	cture arcades; adult v	rideo stores; erotic entertainment/dance			
					ditional or mainstream establishment, ch regularly features live or other			
performances or showings we to the primary purpose of an		shed or characterized b	by an emphasis on t	he depiction, display,	or description or featuring is incidental			
		nent as defined above b	by the DeKalb Count	ty Code, or does it off	er any form of adult entertainment?			
☐ Yes ☐ No					·			
	Owner Architect	Gonoral Contractor	hould sign this see	nlication EVCEDT	ON: If a tenant is applying to move			
into a commercial space, t			nould sign this ap	pilcation. EXCEPTION	ON. II a teriant is applying to move			
l,		, do solemnly swe	ar that the informati	on on this application	is true, and that no false or misleading			
	n to obtain a building				false or misleading information in this			
	d that I must comply	with all county ordinanc	es and regulations.		te of occupancy issued as a result of ovide any clearance(s) and/or			
I further agree that I shall be	responsible from the	date of this permit, or f	rom the time of the	beginning of the first	work, whichever shall be earlier, for all			
injury or damage of any kind	resulting from this we	ork, whether from basic	services or addition	nal services, to persor	ns or property. I agree to exonerate,			
indemnify and save harmless the county from and against all claims or actions, and all expenses incidental to the defense of any such claims, litigation, and actions, based upon or arising out of damage or injury (including death) to persons or property caused by or sustained in connection with any work								
performed under the building	g permit issued as a r	esult of this application.						
		Signature						